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**TRANSMITTAL  
FORM**

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
Total Number of Pages in This Submission

|                        |                        |
|------------------------|------------------------|
| Application Number     | 10/664,046-Conf. #2591 |
| Filing Date            | September 16, 2003     |
| First Named Inventor   | Scott E. Miller        |
| Art Unit               | 1797                   |
| Examiner Name          | N. A. Bowers           |
| Attorney Docket Number | B1102.70027US00        |

**ENCLOSURES (Check all that apply)**

|  |  |  |
|--|--|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form<br><input type="checkbox"/> Fee Attached<br><input checked="" type="checkbox"/> Amendment/Reply<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><input checked="" type="checkbox"/> Extension of Time Request<br><input type="checkbox"/> Express Abandonment Request<br><input type="checkbox"/> Information Disclosure Statement<br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input type="checkbox"/> Reply to Missing Parts/Incomplete Application<br><input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Licensing-related Papers<br><input type="checkbox"/> Petition<br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Request for Refund<br><input type="checkbox"/> CD, Number of CD(s) _____<br><input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC<br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)<br><input type="checkbox"/> Proprietary Information<br><input type="checkbox"/> Status Letter<br><input type="checkbox"/> Other Enclosure(s) (please Identify below): |
| Remarks  |  |  |

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

|              |   |          |        |
|--------------|---|----------|--------|
| Firm Name    | WOLF, GREENFIELD & SACKS, P.C.  |          |        |
| Signature    |  |          |        |
| Printed name | Tani Chen, Sc.D.  |          |        |
| Date         | August 19, 2008   | Reg. No. | 52,728 |

**Certificate of Electronic Filing Under 37 CFR 1.8**

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted via the Office electronic filing system in accordance with § 1.6(a)(4).

Dated: August 19, 2008

Signature: 

(Eva J. Poole)

|   |                        |  |  |                    |                        |             |                    |                      |                 |               |              |          |      |                     |                 |
|---|------------------------|--|--|--------------------|------------------------|-------------|--------------------|----------------------|-----------------|---------------|--------------|----------|------|---------------------|-----------------|
| <p>Effective on 12/08/2004.<br/>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</p> <h2 style="text-align: center;">FEE TRANSMITTAL</h2> <h3 style="text-align: center;">For FY 2008</h3> |                        | <p><b>Complete if Known</b></p> <table border="1"> <tr> <td>Application Number</td> <td>10/684,046-Conf. #2591</td> </tr> <tr> <td>Filing Date</td> <td>September 16, 2003</td> </tr> <tr> <td>First Named Inventor</td> <td>Scott E. Miller</td> </tr> <tr> <td>Examiner Name</td> <td>N. A. Bowers</td> </tr> <tr> <td>Art Unit</td> <td>1797</td> </tr> <tr> <td>Attorney Docket No.</td> <td>B1102.70027US00</td> </tr> </table> |  | Application Number | 10/684,046-Conf. #2591 | Filing Date | September 16, 2003 | First Named Inventor | Scott E. Miller | Examiner Name | N. A. Bowers | Art Unit | 1797 | Attorney Docket No. | B1102.70027US00 |
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| First Named Inventor  | Scott E. Miller        |  |  |                    |                        |             |                    |                      |                 |               |              |          |      |                     |                 |
| Examiner Name   | N. A. Bowers           |  |  |                    |                        |             |                    |                      |                 |               |              |          |      |                     |                 |
| Art Unit  | 1797                   |  |  |                    |                        |             |                    |                      |                 |               |              |          |      |                     |                 |
| Attorney Docket No.   | B1102.70027US00        |  |  |                    |                        |             |                    |                      |                 |               |              |          |      |                     |                 |
| <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27   |                        |  |  |                    |                        |             |                    |                      |                 |               |              |          |      |                     |                 |
| TOTAL AMOUNT OF PAYMENT   | (\$)                   | 525.00   |  |                    |                        |             |                    |                      |                 |               |              |          |      |                     |                 |

**METHOD OF PAYMENT** (check all that apply)

☐ Check   
 ☒ Credit Card   
 ☐ Money Order   
 ☐ None   
 ☐ Other (please identify): \_\_\_\_\_

☒ Deposit Account   
 Deposit Account Number: 232825   
 Deposit Account Name: Wolf, Greenfield & Sacks, P.C.

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below   
 ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17   
 ☒ Credit any overpayments

**FEE CALCULATION**

**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

| Application Type | FILING FEES |                       | SEARCH FEES |                       | EXAMINATION FEES |                       | Fees Paid (\$) |
|------------------|-------------|-----------------------|-------------|-----------------------|------------------|-----------------------|----------------|
|                  | Fee (\$)    | Small Entity Fee (\$) | Fee (\$)    | Small Entity Fee (\$) | Fee (\$)         | Small Entity Fee (\$) |                |
| Utility          | 310         | 155                   | 510         | 255                   | 210              | 105                   |                |
| Design           | 210         | 105                   | 100         | 50                    | 130              | 65                    |                |
| Plant            | 210         | 105                   | 310         | 155                   | 160              | 80                    |                |
| Reissue          | 310         | 155                   | 510         | 255                   | 620              | 310                   |                |
| Provisional      | 210         | 105                   | 0           | 0                     | 0                | 0                     |                |

**2. EXCESS CLAIM FEES**

| Fee Description                                    | Fee (\$) | Small Entity Fee (\$) |
|--|----------|-----------------------|
| Each claim over 20 (including Reissues)            | 50       | 25                    |
| Each independent claim over 3 (including Reissues) | 210      | 105                   |
| Multiple dependent claims                          | 370      | 185                   |

|  |  |
|--|--|
| <b>Total Claims</b> <b>Extra Claims</b> <b>Fee (\$)</b> <b>Fee Paid (\$)</b><br>-    x    =    =   | <b>Multiple Dependent Claims</b><br><b>Fee (\$)</b> <b>Fee Paid (\$)</b> |
| HP = highest number of total claims paid for, if greater than 20.<br><b>Indep. Claims</b> <b>Extra Claims</b> <b>Fee (\$)</b> <b>Fee Paid (\$)</b><br>-    x    =    = |  |
| HP = highest number of independent claims paid for, if greater than 3.   |  |

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).


| Total Sheets | Extra Sheets | Number of each additional 50 or fraction thereof | Fee (\$) | Fee Paid (\$) |
|--------------|--------------|--|----------|---------------|
| - 100 =      | /50 =        | (round up to a whole number) x                   | =        |               |

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): 2253 Extension for response within third month 525.00

**SUBMITTED BY**

|                   |   |                                   |                 |           |              |
|-------------------|---|-----------------------------------|-----------------|-----------|--------------|
| Signature         |  | Registration No. (Attorney/Agent) | 52,728          | Telephone | 617.646.8000 |
| Name (Print/Type) | Tani Chen, Sc.D.  | Date                              | August 19, 2008 |           |              |

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I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted via the Office electronic filing system in accordance with § 1.6(a)(4).

Dated: August 19, 2008

Signature:  (Eva J. Poole)